TRANSMITTAL AND NOTICE OF APPROVAL OF	1. TRANSMITTAL NUMBER:	2. STATE	
` STATE PLAN MATERIAL			
	03-01	NC	
FOR: HEALTH CARE FINANCING ADMINISTRATION	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)		
TO: REGIONAL ADMINISTRATOR	4. PROPOSED EFFECTIVE DATE		
HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES	January 1, 2003		
5. TYPE OF PLAN MATERIAL (Check One):			
□ NEW STATE PLAN □ AMENDMENT TO BE CONSIDERED AS NEW PLAN X AMENDMENT			
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AME		amendment)	
6. FEDERAL STATUTE/REGULATION CITATION:	7. FEDERAL BUDGET IMPACT:	(EE EAA E)	
42 CFR Part 435, Subpart F		(55,544.5)	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:		665,701)	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable):		
Supplement 8b to Attachment 2.6-A, Page 1	Supplement 8b to Attachmen	t 2.6-A, Page 1	
10. SUBJECT OF AMENDMENT:			
More Liberal Methods of Treating Resources for Medically Needy Aged, Blind and Disabled Individuals			
11. GOVERNOR'S REVIEW (Check One): ☐ GOVERNOR'S OFFICE REPORTED NO COMMENT ☐ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED ☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	X OTHER, AS SPE	CIFIED: Not Required	
12. SIGNATURE OF STATE AGENCY OFFICIAL:	16. RETURN TO:		
13. TYPED NAME:	Office of the Secretary		
Carmen Hooker Odom	Department of Health and Human Services		
14. TITLE:	2001 Mail Service Center		
Secretary	Raleigh, North Carolina 27699-2001		
15. DATE SUBMITTED:	-		
3/27/03			
FOR REGIONAL OFFICE USE ONLY			
17. DATE RECEIVED:	18. DATE APPROVED:		
March 27, 2003	May 22, 2003		
PLAN APPROVED – ON 19. EFFECTIVE DATE OF APPROVED MATERIAL:	20 SANATURE OF SECTIONAL OF	EICIAL	
January 1, 2003	Krimato K Council	FICIAL:	
21. TYPED NAME:	22. TITLE: Associate Regional Administrator		
Rhonda R. Cottrell	Division of Medicaid & Children's Health		
23 REMARKS:			

Revision: HCFA-PM-91-4 (BPD) AUGUST 1991

Supplement 8b to ATTACHMENT 2.6-A Page I

OMB No.: 0938-

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: North Carolina

MORE LIBERAL METHODS OF TREATING RESOURCES

UNDER SECTION 1902(r)(2) OF THE ACT

_____ Section 1902(f) State

X Non-Section 1902(f) State

1. OPTIONAL CATEGORICALLY NEEDY DESCRIBED IN 1902(a)(10) (A) (ii) AND MEDICALLY NEEDY AGED, BLIND AND DISABLED INDIVIDUALS AND QUALIFIED MEDICARE BENEFICIARIES AND SPECIFIED LOW-INCOME MEDICARE BENEFICIARIES AND QUALIFYING INDIVIDUALS

Methodologies less restrictive than SSI.

- a. The value of personal effects and-household goods are not counted.
- b. The current market value for real property is the tax assessed value. The tax assessed value may be reduced if evidence is provided proving that the current market value is less than the tax assessed value.
- c. For individuals not receiving optional State Supplements, the value of life estate interest in real property is not counted.
- d. For individuals not receiving optional State Supplements, the value of tenancy in common interest in real property is not counted.
- e. Value of burial plots are not counted.
- f. The cash value of life insurance when the total face value of all cash value bearing life insurance policies does not exceed ten thousand dollars is not counted.
- g. Up to \$12,000 of real property contiguous to the individual's principal place of residence when the individual has no ownership interest in his principal place of residence.

2. MEDICALLY NEEDY AGED. BLIND AND DISABLED INDIVIDUALS--

Methodologies less restrictive than SSI

Individuals with resources in excess of the resource limit at the first moment of the month may become eligible at the point that resources are reduced to the allowable limit.

3. CATEGORICALLY AND MEDICALLY NEEDY AFDC RELATED INDIVIDUALS

Methodologies less restrictive than AFDC

- a. The value of real property is not counted.
- b. The value of one vehicle per adult is not counted.
- c. The value of trusts funds, burial contracts and retirement accounts is not counted.

TN No. <u>03-01</u>		
Supersedes -	Approval Date 05/22/03	EffectiveDate 01/01/03
TN No. <u>01-10</u>		HCFA ID: 7985E